

DATE



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PATENT (U.S.A.) ATTORNEY'S DOCKET NO. 101.0078-00000 Express Mali No.: EL389233871US

DECLARATION

Express Mail No.: E

and POWER OF ATTORNEY

As a below named inventor, I declare that the information given harein is true, that I believe that I am the original, first and sole inventor (if only one name is listed as 1 below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

MANUFACTURED MAJOR LONG BONE RING IMPLANT SHAPED TO CONFORM TO A PREPARED INTERVERTEBRAL

IMP the cp	LANTATION SPACE, pocification of which is attached was filed on as	I LONG BONE RING IMPLANT SHAPE Thereto unless the following box is checked: United States Application Number or PCT Internation of citizenship are as stated below next to my name,			-	
1 have 1 here	towiedge my duty to disclose it by state that I have reviewed a by claim foreign priority benefit	nformation which is material to the patentability of thi and understand the contents of the above identified a as under Tide 35, United States Code, § 119 of any fi ion for patent or inventor's certificate having a filing o	ipecification, including the claim; oreign application(s) for patent of data before that of the applicatio	8, as amended	by any amendment referred to above.	
	·	PRIOR FOREIGN	APPLICATION(S)			
	COUNTRY APPLICATION NUMBER		DATE OF FILING Month Day Year		PRIORITY CLAIMED UNDER 35 U.S.C. 119	
duty to	opiicauon is not disclosed in the o disclose information which is	35, United States Code, §120 of any United States a prior United States application in the manner provimaterial to patantability as defined in Title 37, Code nternational filing date of this application.	dod by the first nemerous at Yiu	- 35 H-H-H CI	nina Carlo C 446 I antinanta da atra	
(Applic	cation Serial No.)	(Filing	 a Date)		/Clabia	
POWE and To Thoms	ER OF ATTORNEY: As a named and analy Office connected the	ned Inventor, I hereby appoint the following attornoy	s) and/or Agent(s) to prosecute	844	(Slatus) and transact all business in the Patent dee Ferrare	
	22882	Customer ID #22882 MARTIN & FERRARO LLP 14500 Avion Parkway, Suite 300 Chantilly, VA 20151-/1101	United Table Horse Galle		: :88-4800	
4	CLERIA PRODUCTIVO CERICE					
	Name of Inventor Gary K. Michelson, M.D.		Residence: CITY Venice		STATE or COUNTRY California	
1						
	Post Office Address 438 Sherman Canal, Venic	ce, CA 90291			CITIZENSHIP US	
2	Name of Inventor		Rosidence: CITY		STATE or COUNTRY	
2	Post Office Address				CITIZENSHIP	
_	Name of inventor	•	Residence: CITY		STATE or COUNTRY	
3	Post Office Address				CITIZENSHIP	
4	Name of Inventor		Residence: CITY		STATE or COUNTRY	
	Post Office Address				CITIZENSHIP	
these s	statements were made with the	nade herein of my own knowledge are true and that a knowledge that willful false statements and the like at such willful false statements may jacpandize the	e so made are punishable by fin	e or imprisonm	ent, or both, under Section 1001 of Title	
SIGN	NATURE OF INVENTOR 1	ملل	SIGNATURE OF INVENTOR 2			
DATI	E 6/8/200	6	DATE			
SIGN	NATURE OF INVENTOR 9		SIGNATURE OF INVENTOR 4			